Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
MIDDLE DISTRICT OF FLORIDA	-	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Jane First name Louise Middle name Hudson Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2906	

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Debtor 1 Jane Louise Hudson Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	204 Ramblewood Drive Sanford, FL 32773	If Debtor 2 lives at a different address:
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Seminole	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Del	btor 1 Jane Louise Huds	on				Case number (if known)	
Pai	Tell the Court About	Your Bankrı	uptcy Ca	ise			
7.	The chapter of the Bankruptcy Code you are				nch, see <i>Notice Required by</i> e 1 and check the appropria	r 11 U.S.C. § 342(b) for Individuals Filing for Bank te box.	kruptcy
	choosing to file under	■ Chapte	r 7				
		☐ Chapte	r 11				
		☐ Chapte	r 12				
		☐ Chapte	r 13				
8.	How you will pay the fee	■ I will	pay the	e entire fee when I f	le my petition. Please che	ck with the clerk's office in your local court for mo	re details
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	abou orde	it how yo r. If your	ou may pay. Typically	, if you are paying the fee y	ourself, you may pay with cash, cashier's check, nalf, your attorney may pay with a credit card or c	or money
		☐ I nee	ed to pay	the fee in installm		on, sign and attach the Application for Individuals	s to Pay
			•	ee in Installments (Of	,	on only if you are filing for Chapter 7. By law, a jud	dao mou
		but is	s not req	uired to, waive your turning to and your family size and you	fee, and may do so only if you are unable to pay the fee i	our income is less than 150% of the official pover in installments). If you choose this option, you mu	ty line that
		the A	Application	on to Have the Chap	er / Filing Fee Waived (Offi	cial Form 103B) and file it with your petition.	
9.	Have you filed for bankruptcy within the	■ No.					
	last 8 years?	☐ Yes.					
			District		When	Case number	
			District		When	Case number	
			District		When	Case number	
10.	Are any bankruptcy	■ No					
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.					
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your residence?	■ No.	Go to I	ine 12.			
	residence :	☐ Yes.	Has yo	our landlord obtained	an eviction judgment again	st you and do you want to stay in your residence?	?
				No. Go to line 12.			
				Yes. Fill out <i>Initial</i> S bankruptcy petition.		Judgment Against You (Form 101A) and file it wi	ith this

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Deb	otor 1 Jane Louise Huds	son		Case number (if known)
Par	Report About Any Bu	ısinesses	You Own as a Sole Proprie	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of bus	iness
	A sole proprietorship is a			
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	
	If you have more than one sole proprietorship, use a		Number, Street, City, Stat	te & ZIP Code
	separate sheet and attach it to this petition.		Check the appropriate bo	x to describe your business:
			• • •	ness (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
			☐ Stockbroker (as d)	efined in 11 U.S.C. § 101(53A))
			☐ Commodity Broke	r (as defined in 11 U.S.C. § 101(6))
			■ None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> <i>debtor?</i>	deadline operation	s. If you indicate that you are as, cash-flow statement, and f s.C. 1116(1)(B).	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	No.	I am not filing under Chap	oter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	Hazardous Property or An	y Property That Needs Immediate Attention
14.	Do you own or have any	■ No.		
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?	
	public health or safety? Or do you own any		If immediate attention is	
	property that needs immediate attention?		If immediate attention is needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
				Number, Street, City, State & Zip Code

Debtor 1 Jane Louise Hudson

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	otor 1 Jane Louise Huds	son		Cas	se number (if ki	nown)
Par	t 6: Answer These Quest	ions for Repor	ting Purposes			
	What kind of debts do you have?	16a. Are				n 11 U.S.C. § 101(8) as "incurred by an
			No. Go to line 16b.			
			Yes. Go to line 17.			
			e your debts primarily busines ney for a business or investmer			
			No. Go to line 16c.			
			Yes. Go to line 17.			
		16c. Sta	te the type of debts you owe that	at are not consumer debts o	or business del	bts
17.	Are you filing under Chapter 7?	□ No. I ar	n not filing under Chapter 7. Go	to line 18.		
	Do you estimate that after any exempt property is excluded and		n filing under Chapter 7. Do yoເ paid that funds will be available			s excluded and administrative expenses
	administrative expenses are paid that funds will		No			
	be available for distribution to unsecured creditors?		Yes			
18.	How many Creditors do	■ 1-49		□ 1,000-5,000		2 5,001-50,000
	you estimate that you owe?	☐ 50-99		□ 5001-10,000		50,001-100,000
		□ 100-199 □ 200-999		□ 10,001-25,000		☐ More than100,000
19.	How much do you	□ \$0 - \$50,0	00	□ \$1,000,001 - \$10 million	n	□ \$500,000,001 - \$1 billion
	estimate your assets to be worth?	□ \$50,001 -	\$100,000	□ \$10,000,001 - \$50 mill	lion	□ \$1,000,000,001 - \$10 billion
		\$100,001		\$50,000,001 - \$100 mil		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
		□ \$500,001	- \$1 million	□ \$100,000,001 - \$500 m	IIIION	inoie than \$50 billion
20.	How much do you	□ \$0 - \$50,0	00	□ \$1,000,001 - \$10 million	n	□ \$500,000,001 - \$1 billion
	estimate your liabilities to be?	□ \$50,001 -	\$100,000	□ \$10,000,001 - \$50 mill		□ \$1,000,000,001 - \$10 billion
		■ \$100,001 ·		□ \$50,000,001 - \$100 mil □ \$100,000,001 - \$500 m		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
		□ \$500,001	- \$1 million	— \$100,000,001 - \$300 H	IIIIOI	I Wore than 400 billion
Par	t 7: Sign Below					
For	you	I have examir	ned this petition, and I declare u	nder penalty of perjury that	the informatio	n provided is true and correct.
			en to file under Chapter 7, I am Code. I understand the relief a			er Chapter 7, 11,12, or 13 of title 11, e to proceed under Chapter 7.
			represents me and I did not parave obtained and read the notion			attorney to help me fill out this
		I request relie	f in accordance with the chapte	r of title 11, United States C	Code, specified	in this petition.
		bankruptcy ca and 3571.	ase can result in fines up to \$25			perty by fraud in connection with a , or both. 18 U.S.C. §§ 152, 1341, 1519,
		/s/ Jane Louis	uise Hudson	Signature	of Debtor 2	
		Signature of I		Signature	, or Dobtor 2	
		Executed on	March 25, 2016	Executed	on	
			MM / DD / YYYY		MM / DD)/YYYY

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Debtor 1 Jane Louise Hud	son	Cas	se number (if known)
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, United	States Code, and have e	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies, conscient schedules filed with the petition is incorrect.	ertify that I have no knov	wledge after an inquiry that the information in the
	/s/ Timothy L. Dave	Date	March 25, 2016
	Signature of Attorney for Debtor		MM / DD / YYYY
	Timothy L. Dave		
	The Law Office of Timothy L. Dave, P.A.		
	P.O. Box 951535		
	Lake Mary, FL 32795 Number, Street, City, State & ZIP Code		
	Contact phone (321) 281-5814	Email address	timothydavelaw@yahoo.com
	25866		

Bar number & State

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		. (.) . (
	n this information					
Deb		ne Louise Huds	Middle Name	Last Name		
	tor 2	st Name	Middle Name	Land		
	3,		Middle Name	Last Name		
Unit	ed States Bankrupt	cy Court for the:	MIDDLE DISTRICT OF	FLORIDA		
Case (if kno					_	c if this is an ded filing
Sur		our Assets a		nd Certain Statistical Information		12/15
infor	mation. Fill out all	l of your schedule	es first; then complete th	ne information on this form. If you are filing amend k the box at the top of this page.		
Part	1: Summarize	Your Assets				
					Your a Value o	ssets of what you own
1.	Schedule A/B: Pr	r operty (Official Fo	orm 106A/B)		\$	102,878.00
					\$	27 492 02
			•		· —	37,482.93
	1c. Copy line 63,	lotal of all property	on Schedule A/B		\$	140,360.93
Part	2: Summarize	Your Liabilities				
						abilities t you owe
2	Cabadula D. Crad	litara Wha Llava Cl	aima Caayrad by Dranamh	(Official Form 100D)	Amoun	t you owe
2.			aims Secured by Property nn A, Amount of claim, at	the bottom of the last page of Part 1 of Schedule D	\$	115,399.00
3.			Unsecured Claims (Officia I (priority unsecured claim	l Form 106E/F) as) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy the total	I claims from Part 2	2 (nonpriority unsecured c	laims) from line 6j of Schedule E/F	\$	121,628.90
				Your total liabilities	\$	237,027.90
Part	3: Summarize	Your Income and	Expenses			
4.		Income (Official Fo		÷1	\$	2,475.00
5.		Expenses (Official y expenses from line			\$	2,825.49
Part	4: Answer The	se Questions for	Administrative and Stati	istical Records		
6.			er Chapters 7, 11, or 13? on this part of the form. Cl	heck this box and submit this form to the court with yo	ur other scl	nedules.
7.	■ Yes What kind of deb	ot do you have?				
				debts are those "incurred by an individual primarily for g for statistical purposes. 28 U.S.C. § 159.	a personal	family, or
		are not primarily on your other schedu		ve nothing to report on this part of the form. Check this	box and s	ubmit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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Debtor 1 Jane Louise Hudson Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total o	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	Case 6:16	-DK-UZUU	4-KS	J Doc 1 Filed 03/26/16	Page .	10 01 52	
Fill in this inforn	mation to identify your	case and this	s filing	:			
Debtor 1	Jane Louise Hud	lson					
	First Name	Middle N	Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle N	Name	Last Name			
United States Ba	nkruptcy Court for the:	MIDDLE DIS	STRICT	OF FLORIDA			
Case number _							☐ Check if this is an amended filing
Official Fo	rm 106A/B						
Schedul	e A/B: Prop	erty					12/15
	Each Residence, Building nave any legal or equitable t 2.			Estate You Own or Have an Interest In ence, building, land, or similar property?			
	Ilewood Drive if available, or other description		What	is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative	the amount	of any secured	ims or exemptions. Put d claims on <i>Schedule D:</i> ns <i>Secured by Property.</i>
Sanford	FL 327	773-0000 ZIP Code		Manufactured or mobile home Land Investment property	Current val entire prop		Current value of the portion you own? \$102,878.00
			_	Timeshare Other has an interest in the property? Check one Debtor 1 only	(such as fe	e simple, tena e), if known.	our ownership interest ancy by the entireties, or
Seminole				Debtor 2 only			
County				Debtor 1 and Debtor 2 only At least one of the debtors and another information you wish to add about this ite	(see ins	tructions)	munity property
			Lega RAN	erty identification number: al: LOT 45 IBLEWOOD 23 PGS 7 & 8			
	ave attached for Part 1			your entries from Part 1, including any r here		=>	\$102,878.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

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	tor 1 Jane Louise I	Hudson		Case number (if known)	
C	ars, vans, trucks, tracto	ors, sport utility vel	hicles, motorcycles		
	No				
	Yes				
				Do not doduct coours	ed alaims or exemptions. But
3.1	Make: Jeep		Who has an interest in the property? Check one	the amount of any se	ed claims or exemptions. Put cured claims on <i>Schedule D:</i>
	Model: Liberty		Debtor 1 only	Creditors Who Have	Claims Secured by Property.
	Year: 2008		Debtor 2 only	Current value of the	
	Approximate mileage:	76,000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other information: Fair condition		At least one of the debtors and another		
	VIN 1J8GN28K68W Value based on NA		☐ Check if this is community property (see instructions)	\$7,925.0 ———	0 \$7,925.0
□ •			n for all of your entries from Part 2, including a		\$7,925.00
η.					
art	3: Describe Your Person	al and Household Ite	ems		
)o y	ou own or have any lea	nal or equitable int	towart in any of the fallowing items O		
	, ou our or mare un y 10,	gai or equitable int	terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
Е	ousehold goods and fu Examples: Major applianc 1 No	rnishings			portion you own? Do not deduct secured
	ousehold goods and fu Examples: Major applianc	rnishings			portion you own? Do not deduct secured
	ousehold goods and fu Examples: Major applianc I No I Yes. Describe	rnishings es, furniture, linens,	, china, kitchenware	e nsils	portion you own? Do not deduct secured
	ousehold goods and fu Examples: Major applianc I No I Yes. Describe	rnishings es, furniture, linens,	, china, kitchenware tor, washer/dryer, microwave, cooking uto	ensils,	portion you own? Do not deduct secured
	ousehold goods and fu Examples: Major applianc I No I Yes. Describe	rnishings es, furniture, linens, Stove, refrigerat silverware, pots Living room fur	, china, kitchenware tor, washer/dryer, microwave, cooking uto s/pans niture	ensils,	portion you own? Do not deduct secured
	ousehold goods and fu Examples: Major applianc I No I Yes. Describe	rnishings es, furniture, linens, Stove, refrigerat silverware, pots Living room fur	, china, kitchenware tor, washer/dryer, microwave, cooking uto s/pans niture	ensils,	portion you own? Do not deduct secured
	ousehold goods and fu Examples: Major applianc I No I Yes. Describe	rnishings es, furniture, linens, Stove, refrigerat silverware, pots Living room fur Dining room fur Tables/chairs	, china, kitchenware tor, washer/dryer, microwave, cooking uto s/pans niture eniture	ensils,	portion you own? Do not deduct secured claims or exemptions.
	ousehold goods and fu Examples: Major applianc I No I Yes. Describe	rnishings es, furniture, linens, Stove, refrigerat silverware, pots Living room fur Dining room fur Tables/chairs	, china, kitchenware tor, washer/dryer, microwave, cooking uto s/pans niture	ensils,	portion you own? Do not deduct secured claims or exemptions.
	ousehold goods and fu Examples: Major applianc I No I Yes. Describe	rnishings es, furniture, linens, Stove, refrigerat silverware, pots Living room fur Dining room fur Tables/chairs	, china, kitchenware tor, washer/dryer, microwave, cooking uto s/pans niture eniture	ensils,	portion you own? Do not deduct secured claims or exemptions.
	ousehold goods and fu Examples: Major applianc I No I Yes. Describe	rnishings es, furniture, linens, Stove, refrigerat silverware, pots Living room furn Dining room fur Tables/chairs Bedroom furnitu	, china, kitchenware tor, washer/dryer, microwave, cooking uto s/pans niture eniture	ensils,	portion you own? Do not deduct secured claims or exemptions.
EI E	ectronics Examples: Major appliance Output Describe	rnishings es, furniture, linens, Stove, refrigerat silverware, pots Living room fur Dining room fur Tables/chairs Bedroom furnitu	, china, kitchenware tor, washer/dryer, microwave, cooking uto s/pans niture eniture		portion you own? Do not deduct secured claims or exemptions. \$724.0
EI E	Dusehold goods and fur Examples: Major appliance 1 No 1 Yes. Describe	rnishings es, furniture, linens, Stove, refrigerat silverware, pots Living room fur Dining room fur Tables/chairs Bedroom furnitu	tor, washer/dryer, microwave, cooking uto s/pans niture miture ure, dresser, accessories		portion you own? Do not deduct secured claims or exemptions. \$724.0
EI E	ectronics Examples: Major appliance Output Describe	rnishings es, furniture, linens, Stove, refrigerat silverware, pots Living room fur Dining room fur Tables/chairs Bedroom furnitu	tor, washer/dryer, microwave, cooking utos/pans niture miture ure, dresser, accessories eo, stereo, and digital equipment; computers, print nedia players, games		portion you own? Do not deduct secured claims or exemptions. \$724.0 \$3.0 ections; electronic devices
EI E	Dusehold goods and fur Examples: Major appliance 1 No Yes. Describe	rnishings es, furniture, linens, es, furniture, linens, stove, refrigerat silverware, pots Living room furn Dining room fur Tables/chairs Bedroom furnitu Floral art	tor, washer/dryer, microwave, cooking utos/pans niture rniture ure, dresser, accessories eo, stereo, and digital equipment; computers, print nedia players, games		portion you own? Do not deduct secured claims or exemptions. \$724.0

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

□ No

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Debtor 1	Jane Louis	e Hudson C	ase number (if known)	
■ Yes.	. Describe			
		Figurines		\$20.00
Examp	nent for sports and the second	ographic, exercise, and other hobby equipment; bicycles, pool tables, go	If clubs, skis; canoes and k	ayaks; carpentry tools;
		Photography equipment		\$200.00
■ No		es, shotguns, ammunition, and related equipment		
□ No		clothes, furs, leather coats, designer wear, shoes, accessories		
		All clothing		\$100.00
□ No ■ Yes.	. Describe	Jewelry/watch		\$15.00
Exam No □ Yes. 14. Any or □ No	arm animals pples: Dogs, cats Describe ther personal a Give specific ir	nd household items you did not already list, including any health aid	ds you did not list	
		Dvds/cd's, desk, misc tools, lawn mower		\$70.0
for P	Part 3. Write tha	e of all of your entries from Part 3, including any entries for pages your number here	ou have attached	\$1,235.00
	escribe Your Fina wn or have any	ncial Assets legal or equitable interest in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No		have in your wallet, in your home, in a safe deposit box, and on hand w	nen you file your petition	

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Debtor 1	Jane Louise Hudso	n	Case number (if known)	
			ounts; certificates of deposit; shares in credit unions, brokerage houses, and oth s with the same institution, list each.	er similar
□ No ■ Yes			Institution name:	
	17.1.	Checking	Trustco Bank ending in 8468	\$2,846.58
	17.2.	Checking	Trustco B ank ending in 7825	\$6.07
	17.3.	Checking	Wells Fargo Acct ending in 9497	\$56.65
Examp ■ No □ Yes		ent accounts with bro		
joint v ■ No	enture Give specific information	·	orated and unincorporated businesses, including an interest in an LLC, pa % of ownership:	rtnership, and
Negoti Non-ne ■ No	able instruments include egotiable instruments are Give specific information	personal checks, cas those you cannot tra	otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. ansfer to someone by signing or delivering them.	
	nent or pension accoun oles: Interests in IRA, ERI		403(b), thrift savings accounts, or other pension or profit-sharing plans	
■ Yes.	List each account separa Type	tely. of account:	Institution name:	
	401(k)	Florida Retirement System (FRS)	\$19,345.39
	401(k)		\$6,065.36
	IRA			\$2.88
Your s Examp		its you have made so	o that you may continue service or use from a company public utilities (electric, gas, water), telecommunications companies, or others	
■ No □ Yes.			Institution name or individual:	
		odic payment of mon-	ey to you, either for life or for a number of years)	
■ No □ Yes	Issuer nam	ne and description.		
26 U.S.	s in an education IRA, i C. §§ 530(b)(1), 529A(b),		ualified ABLE program, or under a qualified state tuition program.	
■ No □ Yes	Institution	name and descriptio	n. Separately file the records of any interests.11 U.S.C. § 521(c):	

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De	ebtor 1	Jane Louise Hudson	Case number (if known)	
25.		equitable or future interests in property (other than anything listed in lin	ne 1), and rights or powers exercis	able for your benefit
	■ No	Give specific information about them		
26.		s, copyrights, trademarks, trade secrets, and other intellectual property		
		les: Internet domain names, websites, proceeds from royalties and licensing	agreements	
	_	Give specific information about them		
27.		es, franchises, and other general intangibles les: Building permits, exclusive licenses, cooperative association holdings, lic	quor licenses, professional licenses	
	_	Give specific information about them		
M	oney or p	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	unds owed to you		
	■ No □ Yes.	Give specific information about them, including whether you already filed the	returns and the tax years	
29.	Family Examp ■ No	support les: Past due or lump sum alimony, spousal support, child support, maintenal	nce, divorce settlement, property sett	lement
	☐ Yes. (Give specific information		
30.		mounts someone owes you les: Unpaid wages, disability insurance payments, disability benefits, sick pay benefits; unpaid loans you made to someone else	v, vacation pay, workers' compensati	on, Social Security
	■ No □ Yes.	Give specific information		
31.	Examp	s in insurance policies les: Health, disability, or life insurance; health savings account (HSA); credit,	homeowner's, or renter's insurance	
	■ No			
	⊔ Yes. I	Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
32.	If you a	erest in property that is due you from someone who has died re the beneficiary of a living trust, expect proceeds from a life insurance police he has died.	cy, or are currently entitled to receive	property because
	■ No □ Yes.	Give specific information		
33.	Claims	against third parties, whether or not you have filed a lawsuit or made a	demand for payment	
	■ No	les: Accidents, employment disputes, insurance claims, or rights to sue		
	☐ Yes.	Describe each claim		
34.	Other o	ontingent and unliquidated claims of every nature, including countercla	ims of the debtor and rights to set	off claims
	_	Describe each claim		
35.	_ `	ancial assets you did not already list		
	■ No □ Yes.	Give specific information		

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Deb	tor 1	Jane Louise Hudson		Case number (if known)	
36.		ne dollar value of all of your entries from Part 4, including rt 4. Write that number here		-	\$28,322.93
Part	5: Des	scribe Any Business-Related Property You Own or Have an Intere	st In. List any real est	ate in Part 1.	
37. D	o you o	wn or have any legal or equitable interest in any business-related	d property?		
	No. Go	to Part 6.			
	Yes. G	o to line 38.			
Part		scribe Any Farm- and Commercial Fishing-Related Property You Cou own or have an interest in farmland, list it in Part 1.	Own or Have an Intere	st In.	
46. [Do you	own or have any legal or equitable interest in any farm-	or commercial fishi	ng-related property?	
	No.	Go to Part 7.			
	☐ Yes.	Go to line 47.			
Part	7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
•	<i>Examp</i> ■ No	have other property of any kind you did not already list? les: Season tickets, country club membership Give specific information			
54.	Add tl	he dollar value of all of your entries from Part 7. Write tha	t number here		\$0.00
Part	8:	List the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2			\$102,878.00
56.	Part 2	: Total vehicles, line 5	\$7,925.00	_	
57.	Part 3	: Total personal and household items, line 15	\$1,235.00		
58.	Part 4	: Total financial assets, line 36	\$28,322.93		
59.		: Total business-related property, line 45	\$0.00		
60.		: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	: Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$37,482.93	Copy personal property total	\$37,482.93
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$140,360.93

Fil	ll in this inform	ation to identify your case:				
De	ebtor 1	Jane Louise Hudson First Name	Middle Name	L	_ast Name	
De	ebtor 2	, not really	made Name	-		
(Sp	oouse if, filing)	First Name	Middle Name	L	Last Name	
Ur	nited States Ban	kruptcy Court for the: MID	DLE DISTRICT OF FLO	RIDA		
Ca	ase number					
(if k	known)					☐ Check if this is an amended filing
0	fficial For	m 106C				_
		C: The Prope	erty You Cla	ıim	as Exempt	12/15
the nee cas For spe any fun	property you liseded, fill out and se number (if known each item of pecific dollar amy applicable stands—may be unemption to a pa	ted on Schedule A/B: Property attach to this page as many cown). Property you claim as exemptount as exempt. Alternative itutory limit. Some exempticalimited in dollar amount. Horticular dollar amount and the state of the sta	y (Official Form 106A/B) copies of <i>Part 2: Addition</i> of the part 2: Addition of the part 3: Addition	as yo nal Pa e amo full fa heal	our source, list the property that you age as necessary. On the top of any ount of the exemption you claim. ir market value of the property be th aids, rights to receive certain knption of 100% of fair market value of the mark	One way of doing so is to state a sing exempted up to the amount of benefits, and tax-exempt retirement
		statutory amount. the Property You Claim as	Exempt			
1.	Which set of e	exemptions are you claiming	g? Check one only, eve	n if yc	our spouse is filing with you.	
	You are clai	iming state and federal nonba	nkruntov exemptions	11 11 9	S.C. 8 522(h)(3)	
	_	iming federal exemptions. 11			5.0. 3 022(5)(6)	
2.		·	3 ()()	empt,	fill in the information below.	
	Brief descriptio	n of the property and line on	Specific laws that allow exemption			
	Schedule A/B th	nat lists this property	portion you own Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
		wood Drive Sanford, FL	\$102,878.00			Fla. Const. art. X, § 4(a)(1);
	32773 Semi Legal: LOT 4 RAMBLEWO PB 23 PGS 7 Line from School	OOD 7 & 8		•	100% of fair market value, up to any applicable statutory limit	Fla. Stat. Ann. §§ 222.01 & 222.02
	2008 Jeep L Fair condition	iberty 76,000 miles	\$7,925.00		\$1,000.00	Fla. Stat. Ann. § 222.25(1)
	VIN 1J8GN2	8K68W163464 I on NADA avg trade			100% of fair market value, up to any applicable statutory limit	
		erator, washer/dryer,	\$724.00		\$724.00	Fla. Const. art. X, § 4(a)(2)
	silverware, p Living room Dining room Tables/chair	furniture n furniture rs rniture, dresser,			100% of fair market value, up to any applicable statutory limit	

Line from Schedule A/B: 6.1

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tor 1 Jane Louise Hudson			Case number (if known)	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own		ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
Floral art Line from Schedule A/B: 6.2	\$3.00		\$3.00	Fla. Const. art. X, § 4(a)(2)
LINE HOM Schedule AVB. 0.2			100% of fair market value, up to any applicable statutory limit	
Televisions, VCR/DVD player Line from Schedule A/B: 7.1	\$18.00		\$18.00	Fla. Const. art. X, § 4(a)(2)
			100% of fair market value, up to any applicable statutory limit	
Computer, printer Line from Schedule A/B: 7.2	\$85.00		\$55.00	Fla. Const. art. X, § 4(a)(2)
			100% of fair market value, up to any applicable statutory limit	
Photography equipment ine from Schedule A/B: 9.1	\$200.00		\$200.00	Fla. Const. art. X, § 4(a)(2)
30/1044/07/12			100% of fair market value, up to any applicable statutory limit	
Checking: Trustco Bank ending in 8468	\$2,846.58	•	\$2,846.58	Fla. Stat. Ann. § 222.11(2)(
ine from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
Checking: Trustco B ank ending in 7825	\$6.07		\$6.07	Fla. Stat. Ann. § 222.11(2)(
ine from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
Checking: Wells Fargo Acct ending in 9497	\$56.65	•	\$56.65	Fla. Stat. Ann. § 222.11(2)(
ine from Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit	
101(k): Florida Retirement System FRS)	\$19,345.39		\$19,345.39	Fla. Stat. Ann. § 222.21(2)
ine from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit	
I01(k): TIAA/CREF	\$6,065.36		\$6,065.36	Fla. Stat. Ann. § 222.21(2)
			100% of fair market value, up to any applicable statutory limit	
	\$2.88	•	\$2.88	Fla. Stat. Ann. § 222.21(2)
			100% of fair market value, up to any applicable statutory limit	
IRA: Vanguard Line from Schedule A/B: 21.3 Are you claiming a homestead exemption (Subject to adjustment on 4/01/16 and every No Yes. Did you acquire the property cover No Yes	of more than \$155,67 3 years after that for ca	□ □ 25? ases fil	\$2.88 100% of fair market value, up to any applicable statutory limit	nt.)

	Case 6:1	6-DK-U2UU4-KSJ DOC1 FIIEd (03/26/16 Pag	je 18 of 52	
Fill in this informat	tion to identify you	ur case:			
Debtor 1	Jane Louise Hu	idson			
-	First Name	Middle Name Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name Last Name			
United States Bankr	ruptcy Court for the	: MIDDLE DISTRICT OF FLORIDA			
Case number					if this is an ded filing
Official Form	106D				
Schedule D	: Creditors	Who Have Claims Secured	l by Property	y	12/15
		If two married people are filing together, both are equout, number the entries, and attach it to this form. On			
1. Do any creditors ha	ve claims secured b	y your property?			
☐ No. Check th	is box and submit t	his form to the court with your other schedules. Yo	ou have nothing else to	report on this form.	
Yes. Fill in all	I of the information	below.			
Part 1: List All S	Secured Claims				
2. List all secured cla	ims. If a creditor has	more than one secured claim, list the creditor separately	Column A	Column B	Column C
		s a particular claim, list the other creditors in Part 2. As ical order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Wells Fargo	Hm Mortgag	Describe the property that secures the claim:	\$115,399.00	\$102,878.00	\$12,521.00
Creditor's Name		204 Ramblewood Drive Sanford, FL			
		32773 Seminole County Legal: LOT 45			
		RAMBLEWOOD			
		PB 23 PGS 7 & 8			
8480 Staged	oach Cir	As of the date you file, the claim is: Check all that apply.			
Frederick, N		☐ Contingent			
Number, Street, Cit	y, State & Zip Code	☐ Unliquidated			
Who owes the debt	? Check one	☐ Disputed Nature of lien. Check all that apply.			
Debtor 1 only	- Chook one.	\square An agreement you made (such as mortgage or sect	ured		
Debtor 2 only	0 1	car loan)			
☐ Debtor 1 and Debto ☐ At least one of the o	,	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
Check if this claim		■ Other (including a right to offset) Mortgage			
community debt		— Other (including a right to onset)			
	Opened				
	3/05/12				
Date debt was incurre	Last Active 10/01/15	Last 4 digits of account number 6102			
Add the dollar value	e of your entries in C	Column A on this page. Write that number here:	\$115,39	9.00	
	ge of your form, add	the dollar value totals from all pages.	\$115,39		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

		Case 6.16-	DK-02004	1-K21 D00	; i Fileu	03/20/10	Page 19 01 52	
Fill in t	his informatio	n to identify your o	case:					
Debtor	1 1	ane Louise Huds	on					
Bobioi		rst Name	Middle Na	ame	Last Name			
Debtor								
(Spouse i	f, filing) Fi	rst Name	Middle Na	ame	Last Name			
United	States Bankrup	otcy Court for the:	MIDDLE DIS	STRICT OF FLOR	RIDA			
Case n	umber							
(if known)				_				Check if this is an
							a	mended filing
Officia	al Form 10	nee/E						
			ha Hava	Linggering	l Claima			40/4E
		Creditors W					rs with NONPRIORITY clai	12/15
Schedule left. Atta- name an	e D: Creditors W ch the Continua d case number	/ho Have Claims Sect tion Page to this pag (if known).	ured by Proper e. If you have r	ty. If more space is no information to re	s needed, copy t	he Part you nee	th partially secured claims d, fill it out, number the en art. On the top of any addi	tries in the boxes on the
Part 1:		Your PRIORITY Un						
_	•	ve priority unsecured	a ciaims agains	st you?				
	No. Go to Part 2.							
			.,,,					
Part 2:		Your NONPRIORIT						
3. Do	any creditors ha	ive nonpriority unsec	ured claims ag	gainst you?				
	No. You have not	thing to report in this pa	art. Submit this	form to the court with	h your other sche	edules.		
	Yes.							
uns	ecured claim, list n one creditor hol	the creditor separately	for each claim.	For each claim liste	ed, identify what t	ype of claim it is.	m. If a creditor has more that Do not list claims already incursecured claims fill out the	cluded in Part 1. If more
								Total claim
4.1	Cap1/Bstby			Last 4 digits of ac	count number	8059		\$0.00
	Nonpriority Cred	ditor's Name				0	00/05 1 1 1 1 1	
	Po Box 525	3		When was the deb	nt incurred?	Opened 2/3	20/05 Last Active	
	Carol Stream	-		Wileii was the det	ot illeurreur	12/20/03		_
		City State ZIp Code		As of the date you	ı file, the claim i	s: Check all that	apply	
	_	he debt? Check one.		_				
	Debtor 1 onl	•		☐ Contingent				
	Debtor 2 onl	-		Unliquidated				
	Debtor 1 and	•		Disputed				
		of the debtors and and		Type of NONPRIO	KITY unsecured	i claim:		
	☐ Check if this debt	s claim is for a comn	nunity	☐ Student loans				
	ls the claim sul	bject to offset?		Obligations aris report as priority cla		ration agreement	or divorce that you did not	
	■ No	-		☐ Debts to pensio		g plans, and othe	r similar debts	
	☐ Yes			Other. Specify	_ ·			
				— Other, Specify	3			_

Debto	T1 Jane Louise Hudson		Case number (if know)	
4.2	Centerst Bk	Last 4 digits of account number	5345	Unknown
	Nonpriority Creditor's Name 1501 Woodfield Schaumburg, IL 60173	When was the debt incurred?	Opened 2/11/08 Last Active 10/01/11	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	□Yes	November, Agreement 11 TWP 20 BEG 325.75 NW COR O	e Mortgage- Vacant land sold 2015 as part of Dissolution (property legal description: SEC S RGE 32E 5 FT N & 3308.48 FT E OF F SW 1/4 OF SW 1/4 RUN E 30 FT W 660 FT N 330	
4.3	Chase Card	Last 4 digits of account number	0800	\$6,397.00
	Nonpriority Creditor's Name		Opened 11/26/03 Last Active	
	Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	10/14/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.4	Chase Mtg Nonpriority Creditor's Name	Last 4 digits of account number	9167	\$88,282.00
	Po Box 24696 Columbus, OH 43224	When was the debt incurred?	Opened 6/18/12 Last Active 10/01/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	- :	
	☐ Yes	Other. Specify Real Estate	e Mortgage-	

Official Form 106 E/F

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Debtor	1 Jane Louise Hudson		Case number (if know)	
4.5	Chase Mtg Nonpriority Creditor's Name	Last 4 digits of account number	2834	\$0.00
	Po Box 24696 Columbus, OH 43224	When was the debt incurred?	Opened 12/31/07 Last Active 6/15/12	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Real Estate	Mortgage	
4.6	Citi	Last 4 digits of account number	8056	\$18,016.00
	Nonpriority Creditor's Name		Opened 6/26/07 Last Active	
	Po Box 6241 Sioux Falls, SD 57117	When was the debt incurred?	9/02/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
4.7	Florida Hospital Med Group Nonpriority Creditor's Name	Last 4 digits of account number	7820	\$167.38
	P.O. Box 531677 Atlanta, GA 30353-1677	When was the debt incurred?		
•	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify Medical Se	rvices	

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Debtor	Jane Louise Hudson	Case number (if know)				
4.8	JLR Anesthesia	Last 4 digits of account number	\$312.00			
	Nonpriority Creditor's Name P.O. Box 948075 Maitland, FL 32794-8075	When was the debt incurred?				
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Medical Services				
4.9	Orlando Health	Last 4 digits of account number 7979	\$232.52			
	Nonpriority Creditor's Name P.O. Box 620000 Stop 9936 Orlando, FL 32891-9936	When was the debt incurred?				
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Medical Services				
4.1	Pates Law Group	Last 4 digits of account number	\$5,848.00			
	Nonpriority Creditor's Name					
	Attn: Andrea Pate 1521 Mt. Vernon Street	When was the debt incurred?				
-	Orlando, FL 32803 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	Other. Specify Services				

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Debtor 1 Jane Louise Hudson				
4.1	Syncb/Care Credit	Last 4 digits of account number	8729	\$0.00
<u>.</u>	Nonpriority Creditor's Name		Opened 1/24/14 Last Active	<u> </u>
	950 Forrer Blvd Kettering, OH 45420	When was the debt incurred?	6/09/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.1	Td Auto Finance	Last 4 digits of account number	6185	\$0.00
	Nonpriority Creditor's Name	_		
	Po Box 9223 Farmington Hills, MI 48333	When was the debt incurred?	Opened 1/02/08 Last Active 1/03/11	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Automobile	9	
4.1	TIAA-CREF	Last 4 digits of account number	F301	\$1,750.00
	Nonpriority Creditor's Name P.O. Box 1289	When was the debt incurred?		
	Charlotte, NC 28201-1289 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Loan		

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ebtor 1 Jane Louise Hudson				Case number (if know)					
II	Fargo Hm Mortgag	Last 4 digits of account number	3091		\$0.00				
Nonpri	ority Creditor's Name		Onen	ed 9/12/08 Last Active					
	Stagecoach Cir erick, MD 21701	When was the debt incurred?	2/15/ ²						
Numbe	r Street City State Zlp Code	As of the date you file, the claim	is: Check	all that apply					
Who in	curred the debt? Check one.								
Deb	otor 1 only	☐ Contingent							
☐ Deb	otor 2 only	☐ Unliquidated							
☐ Del	otor 1 and Debtor 2 only	Disputed							
☐ At I	east one of the debtors and another	Type of NONPRIORITY unsecured							
	eck if this claim is for a community	☐ Student loans	☐ Student loans						
debt Is the	claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration ag	reement or divorce that you did not					
■ No		Debts to pension or profit-sharing	ıg plans, a	and other similar debts					
☐ Yes		Other. Specify FHA Real E	state N	lortgage					
West	ern Alliance Bank	Local Adicitic of account number	6901		\$624.0				
	prity Creditor's Name	Last 4 digits of account number			Ψ024.0				
P.O.	Box 742628 nnati, OH 45274-2628	When was the debt incurred?							
Numbe	r Street City State Zlp Code	As of the date you file, the claim	is: Check	all that apply					
	curred the debt? Check one.								
Deb	otor 1 only	☐ Contingent							
☐ Deb	otor 2 only	☐ Unliquidated							
☐ Del	otor 1 and Debtor 2 only	☐ Disputed							
☐ At I	east one of the debtors and another	Type of NONPRIORITY unsecured	d claim:						
	eck if this claim is for a community	☐ Student loans							
debt Is the	claim subject to offset?	Obligations arising out of a separeport as priority claims	ration ag	reement or divorce that you did not					
■ No		Debts to pension or profit-sharing	ig plans a	and other similar debts					
☐ Yes		■ Other. Specify Medical Se							
se this page trying to coave more thotified for an et 4: Add	ollect from you for a debt you owe to s an one creditor for any of the debts th ny debts in Parts 1 or 2, do not fill out the Amounts for Each Type of U	about your bankruptcy, for a debt that y omeone else, list the original creditor in at you listed in Parts 1 or 2, list the addi or submit this page.	Parts 1 otional cre	dy listed in Parts 1 or 2. For example, if a or 2, then list the collection agency here. editors here. If you do not have additional purposes only. 28 U.S.C. §159. Add the a	Similarly, if you persons to be				
				Total Claim					
-	6a. Domestic support obligation	ns .	6a.	\$					
Total claims									
m Part 1	6b. Taxes and certain other deb		6b.	\$					
	•	l injury while you were intoxicated	6c.	\$ 0.00					
	6d. Other. Add all other priority un	secured claims. Write that amount here.	6d.	\$					
	6e. Total Priority. Add lines 6a th	rough 6d.	6e.	\$					
				Total Claim					
Total	6f. Student loans		6f.	\$0.00					
claims m Part 2	Co. Obligations origins out of a								
iii i ait z	6g. Obligations arising out of a second control of a second con	separation agreement or divorce that	6g.	\$ 0.00					

Official Form 106 E/F

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Debtor 1 Jane Louise Hudson

Case number (if know)

6i. **Other.** Add all other nonpriority unsecured claims. Write that amount here.

6i. \$ 0.00 \$ 121,628.90

6j. Total Nonpriority. Add lines 6f through 6i.

6j. \$ **121,628.90**

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Fill in this infor	mation to identify your	case:		
Debtor 1	Jane Louise Hud	son		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have th r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.4	,				
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	_

Case 6:16-bk-02004-KSJ Doc 1 Filed 03/26/16 Page 27 of 52

Fill in this	information to identify you	r case:				
Debtor 1	Jane Louise Hud	dson				
Dobtor 0	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing	g) First Name	Middle Name	Last Name			
United State	es Bankruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA			
Case numb	per				☐ Check if this is an amended filing	
	Form 106H ule H: Your Cod	lebtors			12/15	
people are fill it out, anyour name f	filing together, both are eq	ually responsible for suppe boxes on the left. Attach i). Answer every question	lying correct informati the Additional Page to	on. If more space is r this page. On the to	ate as possible. If two married needed, copy the Additional Pag p of any Additional Pages, write	
□ No ■ Yes	in the last 8 years, have yo	u lived in a community pr	operty state or territory	/? (Community proper	ty states and territories include	
	a, California, Idaho, Louisiana					
_	Go to line 3. Did your spouse, former spo	ouse, or legal equivalent live	with you at the time?			
in line Form 1	2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make s	sure you have listed t	g with you. List the person show he creditor on Schedule D (Offic Schedule E/F, or Schedule G to	ial
	Column 1: Your codebtor lame, Number, Street, City, State and 2	ZIP Code		Column 2: The cre Check all schedul	editor to whom you owe the deb es that apply:	t
2 S	Peter Wayland Hudson, I 21 Justin Way Sanford, FL 32773 Spouse (currently in diss			■ Schedule D, I □ Schedule E/F □ Schedule G _ Wells Fargo Hn	, line	

Fill	in this information to identify your c	ase:				
De	btor 1 Jane Louise	Hudson		_		
	btor 2 buse, if filing)			_		
Un	ited States Bankruptcy Court for the	: MIDDLE DISTRICT O	F FLORIDA			
	se number nown)		_			
0	fficial Form 106I				MM / DD/ Y	YYY
S	chedule I: Your Inc	ome				12/15
sup spo atta	as complete and accurate as pose plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing wi	ng jointly, and your spouse ith you, do not include infor	is living wi mation abo	th you, incl out your spo	ude information about your buse. If more space is needed,
1.	Fill in your employment information.		Debtor 1		Debtor 2	or non-filing spouse
	If you have more than one job,	Employment status	■ Employed		☐ Emple	byed
attach a separat	information about additional	Employment status	☐ Not employed		☐ Not e	mployed
	employers.	Occupation	Adjunct Professor			
	Include part-time, seasonal, or self-employed work.	Employer's name	Seminole State College	e		
	Occupation may include student or homemaker, if it applies.	Employer's address	100 Weldon Blvd. Sanford, FL 32773			
		How long employed the	here? 6 years			
Pa	rt 2: Give Details About Mor	nthly Income				
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to report for	any line, wr	ite \$0 in the	space. Include your non-filing
	ou or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information for all e	employers fo	or that perso	on on the lines below. If you need
				For D	ebtor 1	For Debtor 2 or non-filing spouse
2.	List monthly gross wages, sala deductions). If not paid monthly,			\$	2,228.00	\$ N/A _
3.	Estimate and list monthly overt	ime pay.	3.	+\$	0.00	+\$ <u>N/A</u>

Calculate gross Income. Add line 2 + line 3.

\$ 2,228.00

N/A

Deb	tor 1	Jane Louise Hudson	-	С	ase number (if kr	own)				
				ì	For Debtor 1			Debtor		
	Cop	by line 4 here	4.		\$2,228	.00	\$		N/A	_
5.	List	all payroll deductions:								
٥.	5a.	Tax, Medicare, and Social Security deductions	5a.		\$ 66	.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.		\$ 167		\$_		N/A	_
	5c.	Voluntary contributions for retirement plans	5c.		:	.00	\$_		N/A	_
	5d.	Required repayments of retirement fund loans	5d.			.00	\$_		N/A	_
	5e.	Insurance	5e.		\$ 0	.00	\$		N/A	_
	5f.	Domestic support obligations	5f.			.00	\$_		N/A	_
	5g.	Union dues	5g.		. —	.00	\$_		N/A	_
	5h.	Other deductions. Specify:	_ 5h.	.+			+ \$_		N/A	_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.			.00	\$_		N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	(\$ <u>1,995</u>	.00	\$_		N/A	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a.		\$ 0	.00	\$		N/A	
	8b.	Interest and dividends	8b.		·	.00	\$_		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		\$ 0	. 00	\$		N/A	_
	8d.		8d.		·	.00	\$ -		N/A	
	8e.	Social Security	8e.		·	.00	\$-		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Food stamps/WIC	8f.		\$ 480	0.00	\$		N/A	-
	8g.	Pension or retirement income	8g.			.00	\$		N/A	_
	8h.	Other monthly income. Specify:	_ 8h.	.+	\$0	.00	+ \$_		N/A	_
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	480	.00	\$_		N/A	A
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	2,475.00	+ \$		N/A	= \$	2,475.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			_, 0.00	Ė				_,
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not exify:	depe					Schedule 11.		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certain lies						12.	\$	2,475.00
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?							ly income
		Yes. Explain: Dissolution of marriage is pending; child suppor	t will	l lik	elv be order	ed.				

Official Form 106I Schedule I: Your Income page 2

Fill	in this information to identify your case:				
	otor 1 Jane Louise Hudson		Check	c if this is:	
		_	_	An amended filing	
1	ouse, if filing)				ving postpetition chapter the following date:
Unit	ted States Bankruptcy Court for the: MIDDLE DISTRICT OF FLORIDA		<u></u>	MM / DD / YYYY	
	se number				
O	fficial Form 106J				
S	chedule J: Your Expenses				12/1
Be info	as complete and accurate as possible. If two married people are primation. If more space is needed, attach another sheet to this famber (if known). Answer every question.				
Par 1.	t 1: Describe Your Household Is this a joint case?				_
	■ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a separate household?				
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i>	for Separate Househ	old of Debto	or 2.	
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
	Do not state the dependents names.	Son		1	□ No ■ Yes
					□ No
		Son		4	■ Yes
					□ No □ Yes
					□ No
					☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents? ■ No Yes				
Est	t 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless yourness as of a date after the bankruptcy is filed. If this is a suppolicable date.				
the	lude expenses paid for with non-cash government assistance it value of such assistance and have included it on <i>Schedule I: Y</i> ficial Form 106I.)			Your exp	enses
•	,				
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage	4. \$		989.49
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		20.00
5.	 4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as hor 	me equity loans	4d. \$ 5. \$		0.00
		594, .04110	σ. ψ		0.00

Debtor	1 Jane Lo	uise Hudson	Case nun	nber (if known)	
e 11.	::::iii			_	
6. Ut 6a	tilities:	heat, natural gas	60	. \$	90.00
6b		wer, garbage collection	6b.	· .	67.00
				. \$. \$	
60	•	e, cell phone, Internet, satellite, and cable services		·	127.00
6d			6d.	· -	0.00
		ekeeping supplies	7.	*	400.00
		children's education costs	8.		775.00
	-	ry, and dry cleaning	9.	·	55.00
	•	products and services	10.	·	20.00
		ntal expenses	11.	. \$	50.00
		Include gas, maintenance, bus or train fare.	10	c	75.00
	not include c		12.	·	
		clubs, recreation, newspapers, magazines, and books		. \$	40.00
		ributions and religious donations	14.	. \$	20.00
-	surance.				
		surance deducted from your pay or included in lines 4 or 20.	45-	Φ.	
	5a. Life insura		15a.	·	0.00
_	b. Health ins		15b.	·	0.00
15	c. Vehicle in	surance	15c.	. \$	55.00
		ırance. Specify:	15d.	. \$	0.00
		clude taxes deducted from your pay or included in lines 4 or 2			
Sp	pecify:		16.	. \$	0.00
		ease payments:			
17	'a. Car paym	ents for Vehicle 1	17a.	. \$	0.00
17	b. Car paym	ents for Vehicle 2	17b.	. \$	0.00
17	c. Other. Spe	ecify: Cryo-cell storage	17c.	. \$	42.00
17	d. Other. Spe	ecify:	17d.	. \$	0.00
8. Y c	our payments	of alimony, maintenance, and support that you did not re	port as		0.00
		your pay on line 5, Schedule I, Your Income (Official Form	1 06I). 18.	. \$	0.00
9. O 1	ther payments	s you make to support others who do not live with you.		\$	0.00
	pecify:		19.		
		erty expenses not included in lines 4 or 5 of this form or c			
20	a. Mortgages	s on other property	20a.	. \$	0.00
20	b. Real estat	re taxes	20b.	. \$	0.00
20	c. Property,	homeowner's, or renter's insurance	20c.	. \$	0.00
20	d. Maintenar	nce, repair, and upkeep expenses	20d.	. \$	0.00
		er's association or condominium dues	20e.	. \$	0.00
	ther: Specify:			. +\$	0.00
					0.00
	-	monthly expenses			
	2a. Add lines 4	•		\$	2,825.49
22	2b. Copy line 2	2 (monthly expenses for Debtor 2), if any, from Official Form 1	06J-2	\$	
22	c. Add line 22	a and 22b. The result is your monthly expenses.		\$	2,825.49
					,
	-	monthly net income.			
		12 (your combined monthly income) from Schedule I.	23a.	·	2,475.00
23	Bb. Copy your	monthly expenses from line 22c above.	23b.	\$	2,825.49
23		our monthly expenses from your monthly income.	00-	· ·	-350.49
	The result	is your monthly net income.	23c.	\$	-330.43
		(-0	- (0	
		an increase or decrease in your expenses within the year			. or doorooo k '
		bu expect to finish paying for your car loan within the year or do you exterms of your mortgage?	pect your mortgage	payment to increase	or decrease because of a
	_	terms or your mortgage:			
	No.				
П	Yes	Explain here:			

Fill in this informa	ation to identify your o	case:			
Debtor 1	Jane Louise Huds	son			
	First Name	Middle Name	Last Name	1	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bank	kruptcy Court for the:	MIDDLE DISTRICT	OF FLORIDA		
Case number (if known)					☐ Check if this is an amended filing
Official Form Declarati		n Individua	al Debtor's	s Schedules	12/15
obtaining money o years, or both. 18		connection with a ba			atement, concealing property, or 000, or imprisonment for up to 20
Did you pay	or agree to pay some	one who is NOT an at	ttorney to help you f	fill out bankruptcy forms?	
■ No					
☐ Yes. Na	me of person				ankruptcy Petition Preparer's Notice, on, and Signature (Official Form 119)
	of perjury, I declare true and correct.	that I have read the s	ummary and sched	ules filed with this declara	tion and
X /s/ Jane	Louise Hudson		Х		
	uise Hudson of Debtor 1		Sign	ature of Debtor 2	
Date Ma	arch 25, 2016		Date		

Fill in	this inform	nation to identify you	r case:			
Debto		Jane Louise Hu				
Debio	'' '	First Name	Middle Name	Last Name		
Debto (Spouse	or 2 e if, filing)	First Name	Middle Name	Last Name		
United	d States Ba	nkruptcy Court for the:	MIDDLE DISTRICT OF F	LORIDA		
Case (if know	number _				-	heck if this is an mended filing
Stat Be as inform	complete a	and accurate as possi ore space is needed,	attach a separate sheet to	re filing together, both are	ankruptcy equally responsible for sup additional pages, write you	
Part 1		n). Answer every que: Details About Your Ma	arital Status and Where You	Lived Before		
1. W	/hat is you	r current marital statu	ıs?			
	Married Not mai					
2. D	uring the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No] Yes. Lis	st all of the places you l	ived in the last 3 years. Do no	ot include where you live now	٠.	
[Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
	and territor				ity property state or territory co, Texas, Washington and W	
	■ No I Yes. Ma	ake sure you fill out <i>Scl</i>	hedule H: Your Codebtors (Of	ficial Form 106H).		
Part 2	Explai	in the Sources of You	r Income			
Fi	ill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
□	I No ■ Yes. Fil	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	st calenda ary 1 to De	r year: ecember 31, 2015)	■ Wages, commissions, bonuses, tips	\$23,355.18	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

Debtor 1 Jane Louise Hudson							Case number (if known)					
				Debtor 1					Debtor 2			
				Sources	of income that apply.	(be	oss income fore deductions ar clusions)	nd	Sources of inco		Gross income (before deductions and exclusions)	
		ndar year bef o December :		■ Wage bonuses,	s, commissions, tips		\$47,602.	.00	☐ Wages, components, tips	missions,		
				☐ Opera	iting a business				☐ Operating a b	ousiness		
		ndar year: o December (31, 2013)	■ Wage bonuses,	s, commissions, tips		\$51,454.	.00	☐ Wages, commons	missions,		
				☐ Opera	ting a business				☐ Operating a b	ousiness		
	and othe winnings List each	r public benef . If you are fili	it payments; ng a joint ca ne gross inc	pensions; r se and you		rest; di you re	ividends; money c ceived together, lis	collecte st it or	ed from lawsuits; r lly once under De	oyalties; and btor 1.	ecurity, unemployment, d gambling and lottery	
				Debtor 1 Sources Describe	of income below	(be	oss income fore deductions ar clusions)	nd	Describe below.		Gross income (before deductions and exclusions)	
		ndar year: o December (31, 2015)		neous-Proper with spouse land)		\$12,246.	.11				
Par	113. lie	st Certain Pa	vments You	ı Made Ref	ore You Filed for	Rankr	untev					
	,											
6.	Are either No.	Neither De	btor 1 nor	Debtor 2 ha	rimarily consume as primarily consu family, or househo	umer d	debts. Consumer	debts	are defined in 11	U.S.C. § 10	1(8) as "incurred by an	
		During the	90 days bef	ore you filed	I for bankruptcy, d	id you	pay any creditor a	a total	of \$6,225* or mor	e?		
		□ No.	Go to line									
		Yes	paid that c	reditor. Do r payments t		nts for his baı	domestic support nkruptcy case.	obliga	tions, such as chi	ld support a	ne total amount you nd alimony. Also, do	
	■ V	•						G 011 C	r and the date of	aajaotinoni		
	■ Yes				e primarily consult for bankruptcy, d			a total	of \$600 or more?			
		□ No.	Go to line	7.								
		■ Yes	include pa								creditor. Do not nclude payments to an	
	Credito	r's Name and	l Address		Dates of payme	ent	Total amoun		Amount you	Was this p	payment for	
							pai	d	still owe			

ebtor 1 Jane Louise Hudson	n	Case number (if known)							
Creditor's Name and Addres	Dates of payment	Total amount paid	Amount you still owe	Was this payment for					
Pates Law Group Attn: Andrea Pate 1521 Mt. Vernon Street Orlando, FL 32803	11/2015	\$3,000.00	\$8,000.00	☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other Legal Services					
Wells Fargo Hm Mortgag 8480 Stagecoach Cir Frederick, MD 21701	March 2016 Feb 2016 Jan 2016	\$2,968.47	\$115,399.00	■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other					
Insiders include your relatives; of which you are an officer, dire a business you operate as a so alimony.	d for bankruptcy, did you make a pay any general partners; relatives of any g ector, person in control, or owner of 20% ole proprietor. 11 U.S.C. § 101. Include	general partners; partne % or more of their votin	erships of which yog g securities; and a	ou are a general partner; corporat ny managing agent, including one					
No	an incidar								
Yes. List all payments to a Insider's Name and Address		Total amount	Amount you	Reason for this payment					
molaci o Hame and Address	Dates of payment	paid	still owe	Reason for this payment					
Janice Harris 218 Justin Way Sanford, FL 32773	November 2015	\$5,800.00	\$0.00	Repayment of Loan					
insider?	d for bankruptcy, did you make any paranteed or cosigned by an insider.	oayments or transfer a	any property on a	ccount of a debt that benefited					
Insider's Name and Address		Total amount	Amount you	Reason for this payment					
		paid	still owe	Include creditor's name					
art 4: Identify Legal Actions,	Repossessions, and Foreclosures								
	d for bankruptcy, were you a party in personal injury cases, small claims act putes.								
Yes. Fill in the details.									
Case title Case number	Nature of the case	Court or agency		Status of the case					
In Re: Hudson v. Hudson 2015-DR-000276-W	Dissolution of Marriage	Seminole Court Court 301 N. Park Av		■ Pending□ On appeal					

Case 6:16-bk-02004-KSJ Doc 1 Filed 03/26/16 Page 36 of 52

Deb	btor 1 Jane Louise Hudson	Case number	(if known)
10.	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.		
	■ No□ Yes. Fill in the information below.		
	Creditor Name and Address	Describe the Property	Date Value of the property
		Explain what happened	property
11.	accounts or refuse to make a payment be	uptcy, did any creditor, including a bank or financial ins cause you owed a debt?	titution, set off any amounts from your
	Yes. Fill in the details.		D
	Creditor Name and Address	Describe the action the creditor took	Date action was Amount taken
12.	Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?		
	■ No		
	☐ Yes		
Part 5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankru	ptcy, did you give any gifts with a total value of more the	nan \$600 per person?
	■ No □ Yes. Fill in the details for each gift.		
	Yes. Fill in the details for each gift. Gifts with a total value of more than \$60	Describe the gifts	Dates you gave Value
	per person	besonine the gine	the gifts
	Person to Whom You Gave the Gift and Address:		
14.	■ No	ptcy, did you give any gifts or contributions with a tota	I value of more than \$600 to any charity
	Yes. Fill in the details for each gift or co		2.
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	·	Dates you Value contributed
Part 6: List Certain Losses			
15.		hing because of theft, fire, other disaster,	
	□ No		
	Yes. Fill in the details.		
	Describe the property you lost and	Describe any insurance coverage for the loss	Date of your Value of property
		Include the amount that insurance has paid. List pending	loss lost
	Insurance for home repairs	insurance claims on line 33 of Schedule A/B: Property.	\$10,157.00
			4.0,.01.00

Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Person Who Was Paid Address Email or website address Description and value of any property transfer we made	
16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any process consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. □ No ■ Yes. Fill in the details. Person Who Was Paid Address ■ Description and value of any property transfer we or transfer we	
consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy □ No ■ Yes. Fill in the details. Person Who Was Paid Address Description and value of any property transferred or transfer w	
Yes. Fill in the details. Person Who Was Paid Address Description and value of any property transferred Date payment or transfer w	
Person Who Was Paid Description and value of any property Date payment Address transferred or transfer w	
Person Who Made the Payment, if Not You	
The Mesquite Group Pre-filing credit counseling 12/16/2015 600 Six Flags Drive Suite 400 Arlington, TX 76011 www.themesquitegroup.org	\$24.00
The Law Office of Timothy L. Dave, Attorney Fees 3/25/2016 P.A. P.O. Box 951535 Lake Mary, FL 32795 timothydavelaw@yahoo.com	\$1,300.00
17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.	property to anyone who
■ No □ Yes. Fill in the details.	
Person Who Was Paid Address Description and value of any property transferred Date paymen or transfer w made	
 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage or include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. 	
Person Who Received Transfer Address Description and value of property transferred payments received or de paid in exchange	
Person's relationship to you	
 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar debeneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. 	evice of which you are a
Name of trust Description and value of the property transferred	Date Transfer was made

De	btor 1	Jane Louise Hudson			Case nu	mber (if known)	
Pa	rt 8:	List of Certain Financial Accounts, In	nstruments. Safe Depos	it Boxes. and S	itorage Un	its	
	Within sold, Include house	n 1 year before you filed for bankrupt moved, or transferred? de checking, savings, money market, es, pension funds, cooperatives, asso No Yes, Fill in the details.	cy, were any financial ac	ccounts or inst	ruments h	neld in your name, or for	•
	Nam	e of Financial Institution and ress (Number, Street, City, State and ZIP	Last 4 digits of account number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	261	winds Credit Union E. Airport Blvd. ford, FL 32773	XXXX-7349	■ Checking □ Savings □ Money Ma □ Brokerage □ Other			\$0.00
21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for secur cash, or other valuables? ■ No □ Yes. Fill in the details.					sitory for securities,		
		e of Financial Institution ress (Number, Street, City, State and ZIP Code)		Who else had access to it? Address (Number, Street, City, State and ZIP Code)		e the contents	Do you still have it?
22.	= 1	you stored property in a storage unit No Yes. Fill in the details.	or place other than you	r home within	1 year befo	ore you filed for bankrup	tcy
		e of Storage Facility 'ess (Number, Street, City, State and ZIP Code)	to it?	to it? Address (Number, Street, City,		e the contents	Do you still have it?
Pa	rt 9:	Identify Property You Hold or Control	I for Someone Else				
23.	for so	ou hold or control any property that someone.	omeone else owns? Incl	lude any prope	rty you bo	errowed from, are storing	for, or hold in trust
	_	Yes. Fill in the details.					
	-	er's Name 'ess (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe	e the property	Value
Pa	rt 10:	Give Details About Environmental In	formation				
For	the pu	rpose of Part 10, the following definit	tions apply:				
	Envir	onmental law means any federal, stat substances, wastes, or material into	e, or local statute or reg		• .	•	
	regul	ations controlling the cleanup of thes	e substances, wastes, o	or material.			

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Debtor 1	Jane	عوزير ا	Hudson
	Jane	Luuise	nuusui

Case number (if known)

24.	1. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?					
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
25.	Have you notified any governmental unit of ar	ny release of hazardous material?				
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
26.	Have you been a party in any judicial or admin	nistrative proceeding under any envi	ronmental law? Include settlements a	and orders.		
	■ No □ Yes. Fill in the details.					
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case		
Par	rt 11: Give Details About Your Business or Co	onnections to Any Business				
27.		a trade, profession, or other activity, ny (LLC) or limited liability partnershi cutive of a corporation or equity securities of a corporation rt 12.	either full-time or part-time ip (LLP) . Employer Identification number			
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security number or ITIN. Dates business existed			
	IMPACT 5 P.O. Box 43583 Charlotte, NC 28215	501c3	EIN: From-To 01/2012-12-2012			
28.	Within 2 years before you filed for bankruptcy institutions, creditors, or other parties.	,, did you give a financial statement t	o anyone about your business? Inclu	ide all financial		
	■ No □ Yes. Fill in the details below.					
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued				

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Debtor 1 Jane Louise Hudson		Case number (if known)
Part 12: Sign Below		
	ng a false statement, concealing	chments, and I declare under penalty of perjury that the answers g property, or obtaining money or property by fraud in connection for up to 20 years, or both.
/s/ Jane Louise Hudson		
Jane Louise Hudson Signature of Debtor 1	Signature of Debt	tor 2
Date March 25, 2016	Date	
Did you attach additional pages to <i>Your Sta</i> ■ No □ Yes	tement of Financial Affairs for li	ndividuals Filing for Bankruptcy (Official Form 107)?
Did you pay or agree to pay someone who i ■ No	s not an attorney to help you fill	out bankruptcy forms?
☐ Yes. Name of Person Attach the Ba	ankruptcy Petition Preparer's Notic	ce, Declaration, and Signature (Official Form 119).

Fill in this inform	nation to identify your	2250.		
Debtor 1	Jane Louise Huds			
Debtor 1	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	MIDDLE DISTRIC	CT OF FLORIDA	
Case number				
(if known)				☐ Check if this is an
				amended filing
0000	400			
Official For				. =
Statemen	it of Intentio	n for Indiv	iduals Filing Under Chap	ter / 12/15
If you are an indi	vidual filing under chap	oter 7, you must fil	II out this form if:	
_	claims secured by yo	·		
	ed personal property a		ot expired. you file your bankruptcy petition or by the date	seat for the meeting of creditors
whiche	ver is earlier, unless th		e time for cause. You must also send copies to	
on the f				
	ople are filing together d date the form.	in a joint case, bo	oth are equally responsible for supplying correc	t information. Both debtors must
Be as complete a	ind accurate as possib	le. If more space is	s needed, attach a separate sheet to this form. C	On the top of any additional pages,
	our name and case nun		, .	
Part 1: List Yo	our Creditors Who Have	Secured Claims		
1. For any credito	ors that you listed in Pa	art 1 of Schedule D	o: Creditors Who Have Claims Secured by Prope	erty (Official Form 106D), fill in the
information be Identify the cre	low. ditor and the property the	nat is collateral	What do you intend to do with the property the	hat Did you claim the property
·			secures a debt?	as exempt on Schedule C?
Creditor's W name:	ells Fargo Hm Morto	gag	☐ Surrender the property.	□ No
name.			☐ Retain the property and redeem it.☐ Retain the property and enter into a	■ Yes
Description of	204 Ramblewood I FL 32773 Seminol	,	Reaffirmation Agreement.	
property securing debt:	Legal: LOT 45	e County	☐ Retain the property and [explain]:	
securing debt.	RAMBLEWOOD			
	PB 23 PGS 7 & 8			
	our Unexpired Persona		in Oak able O. Francisco Oasterda and Ulliano	
in the information	n below. Do not list rea	I estate leases. Un	in Schedule G: Executory Contracts and Unexp nexpired leases are leases that are still in effect;	the lease period has not yet ended.
You may assume	an unexpired persona	I property lease if	the trustee does not assume it. 11 U.S.C. § 365(p)(2).
Describe your u	nexpired personal prop	perty leases		Will the lease be assumed?
Lessor's name:				□ No
Description of lea Property:	sed			□ v _{oo}
: = F =: A :				☐ Yes
Lessor's name: Description of lea	has			□ No
Property:	ocu .			☐ Yes

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Deb	otor 1	Jane	e Louise Hudson	Case number (if known)	
		name:			□ No
	scriptic perty:	on of lea	ased		☐ Yes
		name:			□ No
	scriptic perty:	on of lea	ased		☐ Yes
	po,.				Li res
		name:			□ No
	perty:	on of lea	ased		☐ Yes
Les	sor's r	name:			□ No
	scriptic perty:	on of lea	ased		☐ Yes
					Li res
		name: on of lea	asad		□ No
	perty:		aseu		☐ Yes
Par	t 3:	Sign E	Below		
			f perjury, I declare that I have indicated my intention abou subject to an unexpired lease.	ut any property of my estate that sec	cures a debt and any personal
X			ouise Hudson X		
			ise Hudson if Debtor 1	Signature of Debtor 2	
	Date	• <u>N</u>	March 25, 2016 Da	ate	

Fill in this info	ormation to identify your case:		Ch	eck on	e box only as d	irected in this form and	in Form
Debtor 1	Jane Louise Hudson			2A-1Sı			
Debtor 2 (Spouse, if filing)				■ 1. T	here is no presi	umption of abuse	
United States	Bankruptcy Court for the: Middle District of	Florida		á	applies will be m	o determine if a presurnade under <i>Chapter 7</i>	•
Case number (if known)	•			□ 3. T	he Means Test	cial Form 122A-2). does not apply now be service but it could ap	
					· · · · · · · · · · · · · · · · · · ·	n amended filing	pry rator.
Official I	Form 122A - 1			_ 0		ir ameriaea iiii ig	
Chapte	7 Statement of Your Cu	rrent Moi	nthly Inc	om	е		12/15
attach a separa case number (i qualifying milit	e and accurate as possible. If two married people to sheet to this form. Include the line number to we f known). If you believe that you are exempted from ary service, complete and file Statement of Exempted calculate Your Current Monthly Income	which the addition om a presumption	nal information a of abuse becau	applies. ise you	On the top of ar	ny additional pages, wri narily consumer debts o	te your name and or because of
1. What is	your marital and filing status? Check one o	nly.					
□ Not r	married. Fill out Column A, lines 2-11.						
☐ Marr	ied and your spouse is filing with you. Fill o	ut both Columns	A and B, lines	2-11.			
■ Marr	ied and your spouse is NOT filing with you.	You and your s	spouse are:				
	ving in the same household and are not leg	•	•	lumns	A and B. lines 2	2-11.	
_	ving separately or are legally separated. Fill	•					ı declare under
рe	enalty of perjury that you and your spouse are ring apart for reasons that do not include evadi	legally separated	d under nonbar	hkruptc	y law that applie	es or that you and you	
101(10A). For the 6 months	verage monthly income that you received from all or example, if you are filing on September 15, the 6-rs, add the income for all 6 months and divide the tota on the same rental property, put the income from that	nonth period would I by 6. Fill in the re	be March 1 thro sult. Do not inclu	ugh Aug de any i	just 31. If the amo	ount of your monthly incon ore than once. For examp	ne varied during ble, if both
				Colum		Column B Debtor 2 or non-filing spouse	
	oss wages, salary, tips, bonuses, overtime, leductions).	and commission	ons (before all	\$	2,321.81	\$	
3. Alimony	y and maintenance payments. Do not include B is filled in.	payments from	a spouse if	\$	0.00	\$	
of you of from an and room	unts from any source which are regularly por your dependents, including child support unmarried partner, members of your househol mmates. Include regular contributions from a source point on the payments you listed on line 3.	. Include regular d, your depende	r contributions nts, parents,	\$	0.00	\$	
	ome from operating a business, profession,	or farm					
			otor 1				
Gross re	eceipts (before all deductions)	\$ 0.00					
•	and necessary operating expenses	-\$0.00		•	0.00	•	
	athly income from a business, profession, or fail	rm \$0.00	Copy here ->	• \$	0.00	\$	
6. Net inco	ome from rental and other real property	Dal	otor 1				
6	and to the form of help to the A	\$ 0.00	otor 1				
	eceipts (before all deductions)	-\$ 0.00 -\$					
•	and necessary operating expenses	·	Copy here ->	\$	0.00	\$	
	othly income from rental or other real property	φ <u> </u>	20p, 11010 ->	\$	0.00	\$	
/. Interest	, dividends, and royalties			Ψ	5.00		

Official Form 122A-1

ebtor 1	Jane Louise Hudson			Case numb	er (<i>if known</i>)			
				Column A Debtor 1		Columbo Debtoi		
3. Une	mployment compensation			\$	0.00	\$	0 1	
	not enter the amount if you contend that the amount Social Security Act. Instead, list it here:	received was a benefit	under					-
F	or you\$	0.0	0					
	or your spouse \$		_					
	sion or retirement income. Do not include any amefit under the Social Security Act.	ount received that was	а	\$	0.00	\$		_
Do r rece dom	ome from all other sources not listed above. Spenot include any benefits received under the Social Served as a victim of a war crime, a crime against hurtestic terrorism. If necessary, list other sources on a below.	ecurity Act or payments nanity, or international o	s or					
				\$	0.00	\$		
				\$	0.00	\$		-
	Total amounts from separate pages, if any.		+	\$	0.00	\$		-
	culate your total current monthly income. Add ling column. Then add the total for Column A to the total		\$	2,321.81	+ \$_		= \$	2,321.81
rt 2: 2. Calc	Determine Whether the Means Test Applies to culate your current monthly income for the year.							
12a.	Copy your total current monthly income from line 1	1		Cop	y line 11	here=>	\$	2,321.81
	Multiply by 12 (the number of months in a year)						X	12
12b.	The result is your annual income for this part of the	e form					12b. \$	27,861.72
3. Calc	culate the median family income that applies to	ou. Follow these steps	s:					
Fill i	n the state in which you live.	FL						
Fill i	n the number of people in your household.	3						
To fi	n the median family income for your state and size and a list of applicable median income amounts, go his form. This list may also be available at the bank	online using the link spe	ecified	in the separ	ate instruc	etions	13. \$	57,012.00
4. How	do the lines compare?							
14a.	Line 12b is less than or equal to line 13. Of Go to Part 3.	n the top of page 1, che	ck box	(1, There is	no presun	nption of a	abuse.	
14b.	_	f page 1, check box 2,	The pr	esumption c	f abuse is	determin	ed by Form	122A-2.
rt 3:	Sign Below							
	By signing here, I declare under penalty of perjury	that the information on	this st	atement and	l in any att	achments	is true and	correct.
	X /s/ Jane Louise Hudson							
	Jane Louise Hudson Signature of Debtor 1							
Da	te MM / DD / YYYY							
	If you checked line 14a, do NOT fill out or file Form	n 122A-2.						

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Debtor 1 Jane Louise Hudson

Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 09/01/2015 to 02/29/2016.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Seminole State College

Income by Month:

6 Months Ago:	09/2015	\$2,249.18
5 Months Ago:	10/2015	\$2,060.21
4 Months Ago:	11/2015	\$2,189.18
3 Months Ago:	12/2015	\$2,513.65
2 Months Ago:	01/2016	\$2,534.94
Last Month:	02/2016	\$2,383.68
	Average per month:	\$2,321.81

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit
AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Middle District of Florida

Debtor(s)	Case No. Chapter	7					
Debtor(s)	Chapter	7					
VERIFICATION OF CREDITOR MATRIX							
The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.							
•		at of creditors is true and correct to the best					

Signature of Debtor

Jane Louise Hudson 204 Ramblewood Drive Sanford, FL 32773

Orlando Health P.O. Box 620000 Stop 9936 Orlando, FL 32891-9936

Timothy L. Dave The Law Office of Timothy L. Dave, P.A. Attn: Andrea Pate P.O. Box 951535 Lake Mary, FL 32795

Pates Law Group 1521 Mt. Vernon Street Orlando, FL 32803

Cap1/Bstby Po Box 5253 Carol Stream, IL 60197 Peter Wayland Hudson, IV 221 Justin Way Sanford, FL 32773

Centerst Bk 1501 Woodfield Schaumburg, IL 60173 Syncb/Care Credit 950 Forrer Blvd Kettering, OH 45420

Chase Card Po Box 15298 Wilmington, DE 19850

Td Auto Finance Po Box 9223 Farmington Hills, MI 48333

Chase Mtg Po Box 24696 Columbus, OH 43224 TIAA-CREF P.O. Box 1289 Charlotte, NC 28201-1289

Citi Po Box 6241 Sioux Falls, SD 57117 Wells Fargo Hm Mortgag 8480 Stagecoach Cir Frederick, MD 21701

Florida Hospital Med Group P.O. Box 531677 Atlanta, GA 30353-1677

Western Alliance Bank P.O. Box 742628 Cincinnati, OH 45274-2628

JLR Anesthesia P.O. Box 948075 Maitland, FL 32794-8075 B2030 (Form 2030) (12/15)

United States Bankruptcy Court Middle District of Florida

In re	Jane Louise Hudson		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPE	NSATION OF ATTOR	NEY FOR DE	EBTOR(S)
C	ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 ompensation paid to me within one year before the filing erendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy, or	r agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept			1,300.00
	Prior to the filing of this statement I have received		\$	1,300.00
	Balance Due		. \$	0.00
2. \$	335.00 of the filing fee has been paid.			
3. T	he source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4. T	he source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5. I	I have not agreed to share the above-disclosed comp	ensation with any other person un	aless they are mem	bers and associates of my law firm.
[I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the nar			
6. I	n return for the above-disclosed fee, I have agreed to re	nder legal service for all aspects of	of the bankruptcy c	ase, including:
b. c.	Analysis of the debtor's financial situation, and rende Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of creditor [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hor	ement of affairs and plan which more and confirmation hearing, and educe to market value; exemens as needed; preparation a	nay be required; any adjourned hea nption planning;	rings thereof; preparation and filing of
7. B	y agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis any other adversary proceeding.			es, relief from stay actions or
		CERTIFICATION		
	certify that the foregoing is a complete statement of any nkruptcy proceeding.	y agreement or arrangement for pa	ayment to me for re	epresentation of the debtor(s) in
Ма	arch 25, 2016	/s/ Timothy L. Dave		
Date		Timothy L. Dave 25 Signature of Attorney	8866	
		The Law Office of 1	Γimothy L. Dave	, P.A.
		P.O. Box 951535 Lake Mary, FL 3279	15	
		(321) 281-5814 Fax	k: (407) 688-1318	3
		timothydavelaw@y	ahoo.com	
		Name of law firm		